

# **United States Consulate General – Hong Kong and Macau** 26 Garden Road

#### Central, Hong Kong

Website: http://hongkong.usconsulate.gov Email: Visa Inquiry Form at our Website Fax: (852) 2147-3586

#### INFORMATION CONCERNING THE MEDICAL EXAMINATION

The Immigration and Nationality Act requires that all immigrant visa applicants and certain nonimmigrant visa applicants, regardless of age, undergo a medical examination before receiving a visa. All applicants must undergo a medical examination administered by one of the following designated doctors before the visa interview. As examinations expire after a period of time, applicants are recommended to schedule their medical examinations no more than 4 weeks prior to the date of the visa interview. Reports generally take approximately one week to prepare. Please bring the unopened results to your visa interview. Please do **NOT** open your results.

Drs. Nicolson & Associates 402B New World Tower 16 Queen's Road, Central, Hong Kong Telephone: (852) 2525-1251 Drs. Anderson & Partners 805-806 Wai Fung Plaza 664 Nathan Road, Mongkok, Hong Kong Telephone: (852) 2390-3398

#### Be sure to take the following items with you to the medical examination:

- 1) Visa interview appointment letter
- 2) All family members named in the visa interview appointment letter
- 3) The travel document of each person who will undergo a medical examination
- 4) This instruction sheet
- 5) Three passport-size photographs of each person to be medically examined
- 6) Sufficient money to pay the required fees. See the fee schedule at the end of this document for specific costs.

NOTE: The examining physician may, at his discretion, require additional X-rays or tests to accurately evaluate your medical condition(s). The applicant is responsible for payment of these costs, which will be in addition to those for the basic examination. All medical fees related to the examination are to be paid at the doctor's office. Children under 15 normally are not required to undergo an X-ray. However, the examining physician reserves the right to request such a test if it is deemed necessary.

- 7) If you have a history of tuberculosis, be prepared to present all old X-rays and medical reports.
- 8) If you are receiving or have received medical treatment, please be prepared to present your medical records, test results, and the dosage of any medication you are current taking.
- 9) Please also remember to bring any prescription eyeglasses and/or hearing aids to the appointment.



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#### WHAT TO EXPECT AT THE MEDICAL EXAMINATION

The medical examination is conducted by one of the appointed panel physicians. It consists of a physical examination (eyes, ears, nose, throat, extremities, heart, lungs, abdomen, lymph nodes, skin and external genitalia), chest X-ray and a blood test, which includes testing for HIV infection and venereal disease. Children between aged 2 and 14 are subject to tuberculin skin test. The blood test and X-ray are generally not required of persons under the age of 15, but they are required, under existing United States law, of all other persons. A blood test for the antibody to the human immunodeficiency virus (HIV) is required as part of your medical examination. HIV is the virus that causes the acquired immune deficiency syndrome (AIDS.) Infection with HIV causes a defect in a person's natural immunity against disease. The test is not to diagnose AIDS but to detect antibodies to the virus. Also, it may be necessary to report results to the local health authorities.

### VACCINATION REQUIREMENTS FOR IV APPLICANTS

## IMPORTANT NOTICE TO IMMIGRANT VISA APPLICANTS CONCERNING VACCINATION REQUIREMENTS

United States immigration law requires immigrant visa applicants to obtain certain vaccinations (listed below) prior to the issuance of a visa. Panel physicians who conduct medical examinations of visa applicants are now required to verify that immigrant visa applicants have met the new vaccination requirements, or that it is medically inappropriate for the visa applicant to receive one or more of the following vaccinations: Acellular pertussis, Haemophilus Influenza type b (Hib), Hepatitis A, Hepatitis B, Human papillomavirus (HPV), Influenza, , Measles and Mumps and Rubella, Meningococcal, Pneumococcal, Polio, Rotavirus, Tetanus and diphtheria toxoids, Varicella, and Zoster

To assist the panel physician and to avoid delays in the processing of your visa, **all immigrant visa applicants** should have their vaccination records available for the panel physician's review at the time of the medical examination. Visa applicants should consult with their regular health care provider to obtain a copy of their immunization record, if one is available. If you do not have a vaccination record, the panel physician will work with you to determine which vaccinations you may need to meet the requirement.

Only a physician can determine which of the listed vaccinations are medically appropriate for you, given your age, medical history and current medical condition. For more detailed information, please visit the <u>Centers for Disease Control and Prevention</u>, <u>Panel Physician Technical Instructions for Vaccination</u>.



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## **Fees for Medical Exams**

Note: This list covers most of the charges associated with the medical examination process. The examining physician may, at his/her discretion, require additional X-rays or tests to evaluate your medical condition(s). You are responsible for payment of these costs, which will be in addition to those associated with the basic examination.

Description		on & Associates in HKD per shot	Drs. Anderson & Partners Unit Price in HKD per shot
Physical exam & documentation		650	650
Serologic test for syphilis & HIV		360	350
Chest x-ray and radiology consult		190	200
Tuberculin skin test		300	130
Acellular pertussis		600	600
Haemophilus Influenza type	b (Hib)	300	280
Hepatitis A (child)		400	360
Hepatitis B (child)		160	160
Hepatitis B (adult)		200	200
Human papillomavirus (HPV	V)	1,300	1,250
Influenza		190	190
Measles and Mumps and Ru	bella	160	160
Meningococcal		380	435
Pneumococcal		180	250
Pneumococcal (infant)		800	800
Polio		120	120
Rotavirus		650	690
Tetanus and diphtheria toxoi	ds	85	85
Varicella		500	500
Blood test for varicella		380	380
Zoster		not available	not available



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## 體格檢查資料

移民及國籍法案要求所有移民簽證申請人和某些非移民簽證申請人,不分年齡,在獲取簽證前要進行體格檢查。所有申請人在簽證面談前一定要由以下其中一位認可醫生進行體格檢查。因爲檢查在一段時間後會過期,建議申請人在不多過簽證面談日四星期前安排體格檢查。報告大概在一星期發出。請把未開封的報告帶來面談。請勿打開你的報告。

李嘉信醫生醫務所 香港中環皇后大道中 16 號 新世界大厦 402 B室

電話:2525-1251

晏打臣醫生醫務所 九龍旺角彌敦道 664 號 惠豐中心 805-806 室

電話:2390-3398

#### 前往作體格檢查時,務必攜帶以下各項:

- 1. 簽證面談約見信
- 2. 簽證面談約見信內所有家庭成員
- 3. 每位需要體格檢查人士的旅行證件
- 4. 此說明書
- 5. 每位體格檢查人士要三張護照相片
- 6. 足夠費用。參閱此文件最後頁的價目表

注意:負責身體檢查的醫生可酌情決定是否需要額外的 X 光透視或檢查,以準確確定你的健康狀況。申請人要負責支付除基本檢查費用外的額外收費。身體檢查所涉及的所有醫療費用,均由醫務所收取。15 歲以下孩童通常不需要接受 X 光透視,但負責身體檢查的醫生亦可視其必要,要求進行這類檢驗。

- 7. 若你曾有肺結核病歷,請在身體檢查時帶同所有過去的 X 光照片及醫療報告。
- 8. 若你現在或曾接受醫藥治療,到醫務所身體檢查時請出示醫療記錄,檢驗結果 和現正服用的藥物的劑量。
- 9. 亦請記得帶同所需的眼鏡和/或助聽器。



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## 在體格檢查時該預料的事情

體格檢查是由其中一位指定醫生進行,包括身體檢查(眼、耳、鼻、咽喉、手和腳、心臟、肺、腹、淋巴結、皮膚和外生殖器),胸部 X 光透視和驗血,驗血包括檢查人類免疫缺陷病毒感染(HIV)及性病。二至十四歲孩童要有結核菌素皮膚測試。根據現行美國法例,除年齡十五歲以下,所有人士都需要驗血和 X 光透視。檢驗對人類免疫缺陷病毒(HIV)的血液抗體是體格檢查一部份。HIV的病毒是促成後天免疫力缺乏症(AIDS,愛滋病)。感染 HIV 會造成人們對疾病的自然免疫力失去功能。檢查並非要診斷出 AIDS,而是爲了查出病毒的抗體,同時,可能需要向當地衛生機關提交結果。

## 移民簽證申請人的接種疫苗要求

### 移民簽證申請人有關疫苗接種要求的重要通知

美國移民法規定,申請移民簽證者必須接種某些疫苗(列表如下),始能獲發移民簽證。指定醫生爲移民簽證申請人做體格檢查時,需證明該申請人已符合此一疫苗接種的新規定,或者證明此人在醫學上不宜接種下列某一項或多項疫苗: Acellular百日咳,B型流行性嗜血桿菌疫苗(Hib),A型肝炎,B型肝炎,人類乳頭瘤病毒疫苗(HPV),流行性感冒,痲疹、腮腺炎、德國痲疹劑,細菌性腦膜炎,肺炎球菌,小兒麻痺,輪狀病毒,破傷風與白喉類毒素,水痘,帶狀病毒。

爲協助指定醫生及避免拖延申請過程,**所有移民簽證申請人**在接受體格檢查時,必須備 妥接種記錄給指定醫生過目。申請人應向其慣常的健康醫護人員索取一份免疫接種記錄。 如果沒有接種記錄,指定醫生會協助你決定需要接種何種疫苗以符合規定。

只有醫生可按年紀,病歷及目前的健康情況,決定你適合接種那項上列的疫苗。

詳細資料請參閱 Centers for Disease Control and Prevention, Panel Physician Technical Instructions for Vaccination.



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## 體格檢查收費

注意:這張表覆蓋大部份有關體格檢查過程的收費。檢查醫生可酌情決定是否需要額外 X 光透視或檢查來評估你的健康情況。你要負責支付基本檢查以外附加的額外費用。

說明	李嘉信醫生醫務所 單位價格每針港幣	晏打臣醫生醫務所 單位價格每針港幣
身體檢查及文件	650	650
梅毒及HIV血清檢驗	360	350
胸部X光透視及放射學諮詢	190	200
結核菌素皮膚測試	300	130
Acellular百日咳	600	600
B型流行性嗜血桿菌疫苗(Hib)	300	280
A型肝炎 (兒童)	400	360
B型肝炎 (兒童)	160	160
B型肝炎 (成人)	200	200
人類乳頭瘤病毒疫苗 (HPV)	1,300	1,250
流行性感冒	190	190
痲疹、腮腺炎、德國痲疹劑	160	160
細菌性腦膜炎	380	435
肺炎球菌	180	250
肺炎球菌 (嬰兒)	800	800
小兒麻痺	120	120
輪狀病毒	650	690
破傷風與白喉類毒素	85	85
水痘	500	500
水痘 驗血	380	380
帶狀病毒	末有疫苗	末有疫苗